

**United States Bankruptcy Court Southern District of Texas**  
**Attorney/Trustee Registration Form for Electronic Filing**

Please complete this form to open an account on the Court's electronic case filing (ECF) system. You will be contacted via email to schedule a date for a mandatory electronic filing course.

If you have already attended ECF training in another district, indicate the district and the date in the space provided.

District/Date: \_\_\_\_\_

First/Middle/Last Name: \_\_\_\_\_

Social Security Number (last four digits only) \_\_\_\_\_

Bar Number: \_\_\_\_\_ Licensing State: \_\_\_\_\_

Firm: \_\_\_\_\_

Street and Suite: \_\_\_\_\_

City State Zip: \_\_\_\_\_

Voice: \_\_\_\_\_

Facsimile: \_\_\_\_\_

E-Mail: \_\_\_\_\_

By submitting this form, I agree to abide by these rules:

1. I agree to keep myself familiar with the technical and procedural requirements as they are adopted by the court.
2. My use of my password is an attorney's or trustee's signature on documents filed electronically for Federal Rule of Bankruptcy Procedure 9011.
3. I agree that I am responsible for all use of my password authorized or not.
4. By registering, I consent to electronic service of documents and notices and waive serve by all other means.

Applicant's Signature \_\_\_\_\_

Check appropriate box:

Trustee

☐

Attorney

☐

Please return to:

Electronic Registration  
United States Bankruptcy Court  
P.O. Box 61010  
Houston, TX 77208-1010